Back to sleep position check chart.

CHILD: _____   **DOB:**_____

"Thank you for checking me every **15 minutes** to make sure that I am breathing, my color is good, my
blanket is not around my head and that I am on my back, unless I can turn over and it's posted at my crib!" --baby

B=BACK   **S=SIDE**   **T=TUMMY**

** For each 15 min block put sleep position, time checked, then initial e.g. (B 7:15 JD)

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
DATE					

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
DATE					